

**Operation Permit Application  
NEW Public Swimming Pool, Wading Pool, Spa, or  
Specialized Water Attraction**

Mecklenburg County Public Health  
700 N. Tryon St., Suite 208  
Charlotte, NC 28202-2222  
Ph: (980) 314-1620 Fax: (704) 336-5306  
<http://meckpools.charmeck.org>

This application form should only be used for NEW Construction pools that have not been previously permitted by  
Mecklenburg County Public Health.

**Section A - Facility Information**

Facility (Name)	
Physical Address	
Pool Type	<input type="checkbox"/> Swimming Pool <input type="checkbox"/> Wading Pool <input type="checkbox"/> Spa <input type="checkbox"/> Specialized Water Attraction
Construction Date	
Contact	
Mailing Address	
Phone	
E-mail	

**Section B - Owner Information**

Owner	
Contact	
Address	
Phone	
E-mail	

**Section C - Operator Information**

Operator (CPO)	
Company	
Address	
Phone	
E-mail	

**Section D - Operational Information (All questions must be answered)**

1. Type of disinfection used: ☐ Chlorine    ☐ Bromine    ☐ Salt
2. Will lifeguards be provided during ALL operating hours? ☐ Yes    ☐ No
3. Will pool operate under seasonal or annual pool permit? \_\_\_\_\_  
Seasonal Pool – April 1 through October 31  
Annual Pool – May 1 through April 30
4. Is pool approved for Night Swimming? ☐ Yes    ☐ No

CPO License #:

**Section E - Permit Fees**

Applications must be accompanied with the required permit fee. Failure to submit a completed application and the required permit fee, or to follow the application instructions provided may prevent or delay the issuance of a permit for operation. Please refer to the pro-rated fee schedule on the back of this form for additional payment information.

Fee Schedule: Annual Pool \$250    Seasonal Pool: \$130

**Section F - Certification & Signature**

I certify that I am the owner or agent for the owner of the property described above and that the information contained in this application is both accurate and complete. I understand that any permit issued based on the information provided may be revoked if it is determined that the information was incorrect.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

OFFICE USE ONLY: Amount Paid \$ \_\_\_\_\_ ☐ Cash    ☐ Charge    ☐ Account    ☐ Check # \_\_\_\_\_

Received By: \_\_\_\_\_ Date: \_\_\_\_\_ ☐ EHDITS    ☐ CDP

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

**Instructions for Completing an Operation Permit Application**  
**NEW Public Swimming Pool, Wading Pool, Spa or Specialized Water Attraction**



1. A completed application is required for all NEW pools.
2. A separate application is required for each swimming pool, wading pool, spa or other.
3. Provide information for all fields in sections A, B, and C.
4. Answer ALL questions in section D.
5. A completed application and the required permit fee must be received before an operation permit will be issued for any pool.

**Fee Schedule:**

- Seasonal Pools / \$130
- Annual Pools / \$250 (see pro-rated table below)

<b>Month Application Submitted</b>	<b>Fee Due</b>	<b>Month Application Submitted</b>	<b>Fee Due</b>
March	\$291.66 (pays for 14 months)	September	\$166.66
April	\$270.83 (pays for 13 months)	October	\$145.83
May	\$250.00	November	\$125.00
June	\$229.16	December	\$104.16
July	\$208.33	January	\$83.33
August	\$187.50	February	\$62.50

6. Read the certification statement in Section F carefully. A signature is required for the application to be considered complete.
7. Completed applications and fees should be submitted to:

Mecklenburg County Public Health:  
Public Swimming Pool Permit  
700 N. Tryon St., Suite 208  
Charlotte, NC 28202-2222  
Fax To: (704) 336-5306

8. If you have questions regarding the application process, please contact our office at (980) 314-1620. You may also obtain information by visiting <http://meckpools.charmeck.org>

Note: A public swimming pool, wading pool or spa cannot be operated until a valid state and local operating permit has been issued. For this reason, staff of the Mecklenburg County Public Health will NOT give verbal permission allowing operation of a facility that does not have a valid permit posted on the premises. The Department will take appropriate enforcement action to ensure protection of public health in cases where a facility is operating without a valid permit.